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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF PENNSYLVANIA	_	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Tara First name Middle name	Jason First name Buddy Middle name
	Bring your picture identification to your meeting with the trustee.	Franklin Last name and Suffix (Sr., Jr., II, III)	Franklin Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1762	xxx-xx-7306

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Debtor 1 Tara Franklin
Debtor 2 Jason Buddy Franklin

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):					
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.					
	Include trade names and doing business as names	Business name(s)	Business name(s)					
		EIN	EIN					
5.	Where you live	2953 Ruthwood Ave Pittsburgh, PA 15227	If Debtor 2 lives at a different address:					
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code					
		Allegheny						
		County	County					
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.					
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code					
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.					
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)					

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Deb	otor 2	Jason Buddy Fran	klin				Case number (if known)					
Par	t 2:	Tell the Court About	our Bank	ruptcy Ca	ase							
7.	Bank	chapter of the	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.									
	cnoo	sing to file under	■ Chapt	er 7								
			☐ Chapt	er 11								
			☐ Chapt	er 12								
			☐ Chapt	er 13								
8.	How	you will pay the fee	abo ord a p	out how your er. If your re-printed	ou may pay. Typically, if you attorney is submitting your address.	are paying the fe payment on your	check with the clerk's office in your local court for more fee yourself, you may pay with cash, cashier's check, or behalf, your attorney may pay with a credit card or che	money eck with				
					ee in Installments (Official Fo		s option, sign and attach the Application for Individuals t	o Pay				
			but app	is not rec olies to yo	juired to, waive your fee, and ur family size and you are u	d may do so only inable to pay the fe	option only if you are filing for Chapter 7. By law, a judg y if your income is less than 150% of the official poverty fee in installments). If you choose this option, you must (Official Form 103B) and file it with your petition.	line that				
9.	bank	you filed for ruptcy within the	■ No.									
	last 8	B years?	☐ Yes.	5								
				District		When	Case number					
				District District		When When	Case number Case number					
				DISTRICT		when	Case number					
10.	cases filed not fi you,	iny bankruptcy s pending or being by a spouse who is ling this case with or by a business er, or by an tte?	■ No □ Yes.									
				Debtor			Relationship to you					
				District		When	Case number, if known					
				Debtor			Relationship to you					
				District		When	Case number, if known					
11.	•	ou rent your ence?	■ No.	Go to	line 12.							
			☐ Yes.	Has yo	our landlord obtained an evi	ction judgment ag	gainst you?					
					No. Go to line 12.							
					Yes. Fill out <i>Initial Stateme</i> this bankruptcy petition.	nt About an Evict	ction Judgment Against You (Form 101A) and file it as p	art of				

Tara Franklin

Debtor 1

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Deb	tor 2 Jason Buddy Fran	nklin			Case number (if known)				
Par	Report About Any Bu	sinesses	You Ow	n as a Sole Propriet	or				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.					
		☐ Yes.	Nam	e and location of busi	iness				
	A sole proprietorship is a								
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numi	ber, Street, City, State	e & ZIP Code				
	it to this petition.		Chec	k the appropriate box	x to describe your business:				
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))				
				Commodity Broker	r (as defined in 11 U.S.C. § 101(6))				
				None of the above					
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedu in 11 U.S.C. 1116(1)(B).							
	For a definition of small	■ No.	I am	not filing under Chap	ter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in to Code.						
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.				
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and r Subchapter V of Chapter 11.				
Par	t 4: Report if You Own or	Have Any	/ Hazard	ous Property or Any	Property That Needs Immediate Attention				
14.	Do you own or have any property that poses or is	■ No.							
	alleged to pose a threat	☐ Yes.	140						
	of imminent and identifiable hazard to		what is	the hazard?					
	public health or safety? Or do you own any								
	property that needs immediate attention?			diate attention is , why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?					
					Number, Street, City, State & Zip Code				

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Debtor 1 Tara Franklin
Debtor 2 Jason Buddy Franklin Case number (if known)

Part 5: Ex

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

] Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 20-20966-CMB Doc 1 Filed 03/13/20 Entered 03/13/20 11:47:27 Desc Main Document Page 6 of 57

	tor 2 Jason Buddy Fran	ıklin			Case no	umber (if known)					
Pari	6: Answer These Questi	ons for Re	eporting Purposes								
16.	What kind of debts do you have?	16a.	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."								
			☐ No. Go to line 16b.								
			Yes. Go to line 17.								
		16b.	Are your debts primarily business or investment of a business or investment of the primarily business of the primarily business or investment of the primarily business of the p								
			☐ No. Go to line 16c.								
			☐ Yes. Go to line 17.								
		16c.	State the type of debts you owe	that are not consume	er debts or bu	usiness debts					
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.							
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do are paid that funds will be availa			t property is excluded and administrative exper ditors?	ises				
	administrative expenses are paid that funds will		■ No								
	be available for distribution to unsecured creditors?		☐ Yes								
18.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,001-50,000					
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		□ 50,001-100,000					
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	0	☐ More than100,000					
19.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 - \$	\$10 million	☐ \$500,000,001 - \$1 billion					
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 -	\$50 million	☐ \$1,000,000,001 - \$10 billion					
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - □ \$100,000,001		_ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `					
20.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 - \$	\$10 million	□ \$500,000,001 - \$1 billion					
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 -		□ \$1,000,000,001 - \$10 billion					
	to be:		001 - \$500,000	□ \$50,000,001 -							
		□ \$500,0	001 - \$1 million	□ \$100,000,001	- \$500 millior	n ☐ More than \$50 billion					
Part	7: Sign Below										
For	you	I have exa	amined this petition, and I declar	re under penalty of pe	erjury that the i	information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.									
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).									
		I request	relief in accordance with the cha	pter of title 11, United	d States Code	e, specified in this petition.					
			cy case can result in fines up to \$			oney or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15	519,				
		/s/ Tara	Franklin			uddy Franklin	_				
		Tara Fra Signature	Inklin of Debtor 1		Jason Budo Signature of D						
		Executed	on March 13, 2020	ı	Executed on	March 13, 2020					
		LAGORIOU	MM / DD / YYYY	<u> </u>		MM / DD / YYYY	_				

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Debtor 1 Tara Franklin Debtor 2 Jason Buddy Fra	nklin	Page 7 01 57	e number <i>(if known)</i>
<u></u>			. ,
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	under Chapter 7, 11, 12, or 13 of title 11, Unite for which the person is eligible. I also certify t	ed States Code, and have e hat I have delivered to the c	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b) ledge after an inquiry that the information in the
to the this page.	/s/ David Z. Valencik Signature of Attorney for Debtor	Date	March 13, 2020 MM / DD / YYYY
	David Z. Valencik Printed name		
	Calaiaro Valencik Firm name		
	938 Penn Avenue, 5th Fl. Suite 501		
	Pittsburgh, PA 15222 Number, Street, City, State & ZIP Code		
	Contact phone 412-232-0930	Email address	

308361 PA Bar number & State Case 20-20966-CMB Doc 1 Filed 03/13/20 Entered 03/13/20 11:47:27 Desc Main

		Docum	ent Page 8 of 57	
Fill in this infor	mation to identify your	case:		
Debtor 1	Tara Franklin			
	First Name	Middle Name	Last Name	
Debtor 2	Jason Buddy Fra	nklin		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA	
Case number _				☐ Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	issets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	112,500.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	30,539.10
	1c. Copy line 63, Total of all property on Schedule A/B	\$	143,039.10
Pa	t 2: Summarize Your Liabilities		
			i abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	79,797.57
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	67,882.00
	Your total liabilities	\$	147,679.57
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,748.62
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,538.20
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bousehold purpose "11 LLS C. & 101(8). Fill out lines 8-9g for statistical purposes. 28 LLS C. & 159		

- household purpose." 11 Ú.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Tara Franklin Document Page 9 of 57

Debtor 2 Jason Buddy Franklin Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,575.10

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Book Ann Only della E/E annually fall suring	Tot	tal claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Case	20-20966-C	CMB Doc 1			d 03/1: ment		Enter <u>10 מפ</u>		3/20 11:	47:27	' D	esc Main
illi	in this inforn	nation to identify	your case and t			ПСП	- Lat	<i>1</i> C 10 (71 31				
Deb	tor 1	Tara Frankli	n										
		First Name		e Name			Last N	lame					
	tor 2 use, if filing)	Jason Budd First Name	·	e Name			Last N	lame					
		nkruptcy Court for			DIC.	T OE DEI							
Jille	eu States bar	ikrupicy Court for	the. WESTERI	יו פוט וי	KIC	I OF PE	NINOTEV	AINIA					
Case	e number _												
													amended filing
Off (icial Fo	rm 106A/E	3										
Sc	hedul	e A/B: Pi	operty										12/15
ı eac	ch category, se		escribe items. List										e category where you
nforn	mation. If more	space is needed,											
nsw	er every quest	tion.											
Part	1: Describe I	Each Residence, B	uilding, Land, or O	ther Rea	al Es	state You	Own or H	ave an Inte	erest In				
. Do	you own or h	ave any legal or eq	uitable interest in	any resid	den	ce, buildiı	ng, land, o	or similar p	roperty?				
	No. Go to Part	2.											
	Yes. Where is												
	TCS. WHOIC IS	the property:											
1.1				Wha	at is	the prope	erty? Chec	k all that app	lv				
	2953 Ruth	wood Avenue				· · Single-fami			•	Do not ded	uct secure	ed claim	ns or exemptions. Put
•	Street address, i	f available, or other des	cription		- - r	Ouplex or n	•	uilding		the amount	of any se	cured o	claims on Schedule D: Secured by Property.
					_ (Condomini	um or coo	perative		Creditors v	viio i iave	Ciaiiiis	Secured by Froperty.
				_		//////////////////////////////////////	ed or moh	ile home					
	Pittsburgh	n PA	15227		Ξ.	and	ed of filot	ile nome		Current va			Current value of the portion you own?
-	City	State	ZIP Code		_	nvestment	property			• • •	12,500.0		\$112,500.00
	- ,				_	imeshare	F F						
] (Other				(such as fe	e simple	, tenan	r ownership interest cy by the entireties, or
				_	_			property?	Check one	a life estat	•		Entirotics
	Allegheny					Debtor 1 or	•			Joint 1e	nants D	y ine	Entireties
	County				_	Debtor 2 or	•	O ambu					
	County			_	_	Debtor 1 ar		∠ only btors and a	nothor		t if this is	comm	unity property
					•					see ۱۱۱۱) m, such as lo	,		
						y identific	-			,			
				Res	sid	ence: H	ouse						
	A J J (L						- .						
		ar value of the po ave attached for					s trom P	art 1, inc	luding any	entries for			\$112,500.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Cars, v					Case number (if known)	
□ No	vans,	trucks, tractors, s	port utility vel	hicles, motorcycles		
Yes	3					
3.1 Ma	lake:	Jeep		Who has an interest in the property? Check one		claims or exemptions. Put red claims on Schedule D:
Мс	lodel:	Cheroke		■ Debtor 1 only		aims Secured by Property.
Ye	ear:	2019		Debtor 2 only	Current value of the	Current value of the
Ap	pproxim	ate mileage:	15000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
Otl	ther info	ormation:		☐ At least one of the debtors and another		
Ve	ehicle	:		☐ Check if this is community property (see instructions)	\$24,047.00	\$24,047.0
3.2 Ma	lake:	Mitsubishi		Who has an interest in the property? Check one	Do not deduct secured of	claims or exemptions. Put
	lake: lodel:	Galant		Debtor 1 only		red claims on Schedule D: nims Secured by Property.
		2011		<u> </u>	Oreditors with mave Cla	шть осьитей бу Рторетту.
	ear:	ate mileage:	83250	Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		ormation:	63230	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
	ehicle			At least one of the debtors and another		
	Ciliolo	·•		Check if this is community property (see instructions)	\$2,430.00	\$2,430.00
Exampl ■ No	oles: Bo			d other recreational vehicles, other vehicles, a tercraft, fishing vessels, snowmobiles, motorcycle		
■ No □ Yes	oles: Bo	oats, trailers, motors	s, personal wa	tercraft, fishing vessels, snowmobiles, motorcycle	accessories	
Exampl ■ No □ Yes Add th	oles: Bo	oats, trailers, motors	s, personal wa		accessories	\$26,477.00
■ No □ Yes Add the pages	oles: Bo s the dol s you l	oats, trailers, motors	s, personal war ortion you ow Part 2. Write t	tercraft, fishing vessels, snowmobiles, motorcycle n for all of your entries from Part 2, including a	accessories	\$26,477.00
■ No □ Yes Add the pages	the dol s you l	pats, trailers, motors Ilar value of the pohave attached for	s, personal war ortion you ow Part 2. Write t	tercraft, fishing vessels, snowmobiles, motorcycle n for all of your entries from Part 2, including a	accessories	\$26,477.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No □ Yes Add the pages art 3: Do you of thouse Examp □ No	the dol s you l Describ own or ehold g	llar value of the po have attached for be Your Personal and r have any legal of goods and furnish Major appliances, fu	ortion you ow Part 2. Write to Household Ite r equitable int	tercraft, fishing vessels, snowmobiles, motorcycle n for all of your entries from Part 2, including a that number here	accessories	Current value of the portion you own? Do not deduct secured
■ No □ Yes Add the pages art 3: Do you of thouse Examp □ No	the dol s you l Describ own or ehold g	llar value of the po have attached for be Your Personal and r have any legal of goods and furnish	ortion you ow Part 2. Write to Household Ite r equitable int	n for all of your entries from Part 2, including a chat number here	accessories	Current value of the portion you own? Do not deduct secured
■ No □ Yes Add the pages art 3: Do you of thouse Examp □ No	the dol s you l Describ own or ehold g	llar value of the po have attached for be Your Personal and r have any legal of goods and furnish Major appliances, fu	ortion you ow Part 2. Write to Household Ite r equitable int	n for all of your entries from Part 2, including a that number hereems ems erest in any of the following items?	accessories	Current value of the portion you own? Do not deduct secured claims or exemptions.
Example No Yes Add the pages art 3: Do you of thouse Example No Yes Electron Example	the dol s you I Describ own or ehold gaples: No es. Des	llar value of the pohave attached for be Your Personal and r have any legal of the pohave any legal of the goods and furnish Major appliances, furnishes	ortion you own Part 2. Write to d Household Ite r equitable int hings urniture, linens, usehold furni	n for all of your entries from Part 2, including a that number hereems ems erest in any of the following items?	any entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
No N	the dol s you I Describ own of ehold conples: No es. Des	llar value of the pohave attached for be Your Personal and r have any legal of the pohave any legal of the goods and furnish Major appliances, furnishes	ortion you own Part 2. Write to d Household Ite r equitable int hings urniture, linens, usehold furni	n for all of your entries from Part 2, including a chat number hereems erest in any of the following items? china, kitchenware ishings	any entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

Case 20-20966-CMB Doc 1 Filed 03/13/20 Entered 03/13/20 11:47:27 Desc Main Document Page 12 of 57 Tara Franklin Debtor 1

Jason Buddy Franklin Case num	ber (if known)
Describe	
nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, musical instruments Describe	skis; canoes and kayaks; carpentry tools;
ms ples: Pistols, rifles, shotguns, ammunition, and related equipment	
Describe	
es sples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe	
Clothes	\$250.00
ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, wat Describe	
Jewelry	\$200.00
ples: Dogs, cats, birds, horses Describe ther personal and household items you did not already list, including any health aids you come specific information	did not list
the dollar value of all of your entries from Part 3, including any entries for pages you have eart 3. Write that number here	attached \$1,850.00
escribe Your Financial Assets	
wn or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
pples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you	file your petition
Cash	\$1.00
sits of money	
	Describe Ident for sports and hobbies Ident for sports and hobbies Ident for sports and hobbies Identification instruments Describe Ins Ins Ins Ins Ins Ins Ins

page 3

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	ebtor 1 ebtor 2	Tara Frankl Jason Budo		Case number (if known)	
			17.1.	Checking Account: PNC Bank	\$45.00
			17.2.	Checking Account: PNC Bank	\$30.00
			17.3.	Savings Account: PNC Bank	\$900.00
18	Examp ■ No	les: Bond funds		rokerage firms, money market accounts	
19	Non-pu joint ve		Institution or issuer	r name: porated and unincorporated businesses, including an interest in ar	n LLC, partnership, and
	■ No □ Yes.	Give specific in	formation about them Name of entity:	% of ownership:	
20	Negotia Non-ne	able instrument egotiable instrui	s include personal checks, ca	otiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. Fansfer to someone by signing or delivering them.	
21		nent or pension les: Interests in	n accounts	403(b), thrift savings accounts, or other pension or profit-sharing plans	
	■ Yes. I	List each accou	nt separately. Type of account:	Institution name:	
			401(k)	Retirement: Wells Fargo	\$1,236.10
22	Your sh	nare of all unus		to that you may continue service or use from a company, public utilities (electric, gas, water), telecommunications companies, o	or others
				Institution name or individual:	
23	Annuiti No		for a periodic payment of mon	ney to you, either for life or for a number of years)	
24	Interests 26 U.S.C	s in an educat	·	qualified ABLE program, or under a qualified state tuition program	ı.
	■ No □ Yes	lı	nstitution name and descriptio	on. Separately file the records of any interests.11 U.S.C. § 521(c):	
25	Trusts,	equitable or fo	uture interests in property (other than anything listed in line 1), and rights or powers exercisal	ble for your benefit
	☐ Yes.	Give specific in	formation about them		
26				and other intellectual property eds from royalties and licensing agreements	
	П Уес	Give specific in	formation about them		

Official Form 106A/B Schedule A/B: Property page 4

	Case 20-20966-CMB Doo		Entered 03/13/20 11:47:2 age 14 of 57	77 Desc Main
Debto Debto			Case number (if known)	
<i>E</i>	censes, franchises, and other general int xamples: Building permits, exclusive license No Yes. Give specific information about them	es, cooperative association ho	oldings, liquor licenses, professional licens	es
Mone	y or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	x refunds owed to you No Yes. Give specific information about them, in	including whether you already	filed the returns and the tax years	
E	a mily support xamples: Past due or lump sum alimony, sp No Yes. Give specific information	oousal support, child support,	maintenance, divorce settlement, property	settlement
<i>E</i>	her amounts someone owes you xamples: Unpaid wages, disability insurance benefits; unpaid loans you made t No Yes. Give specific information		s, sick pay, vacation pay, workers' compe	nsation, Social Security
	terests in insurance policies xamples: Health, disability, or life insurance; No	e; health savings account (HSA	A); credit, homeowner's, or renter's insural	nce
	Yes. Name the insurance company of each Company name:		Beneficiary:	Surrender or refund value:
lf so ■	ny interest in property that is due you from you are the beneficiary of a living trust, experimeone has died. No Yes. Give specific information		ance policy, or are currently entitled to rec	eive property because
E ■	aims against third parties, whether or no xamples: Accidents, employment disputes, i No Yes. Describe each claim			
	her contingent and unliquidated claims on No Yes. Describe each claim	of every nature, including co	ounterclaims of the debtor and rights to	set off claims
35. A r	ny financial assets you did not already lis	st		
36. <i>A</i>	Add the dollar value of all of your entries or Part 4. Write that number here			\$2,212.10

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

☐ Yes. Go to line 38.

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D . I	4	Tara Franklin	III C III	raye 13 U	31	
	tor 1 tor 2	Jason Buddy Franklin			Case number (if known)	
Part		scribe Any Farm- and Commercial Fishing-Related Proposition own or have an interest in farmland, list it in Part 1.	erty You O	wn or Have an Interes	st In.	
46. [Do you	own or have any legal or equitable interest in ar	ıy farm- oı	commercial fishir	ng-related property?	
	No.	Go to Part 7.				
	☐ Yes.	Go to line 47.				
Part	7:	Describe All Property You Own or Have an Interest in	That You D	id Not List Above		
_		have other property of any kind you did not alre les: Season tickets, country club membership	ady list?			
	Yes. 0	Give specific information				
54.	Add ti	ne dollar value of all of your entries from Part 7.	Write that	number here		\$0.00
Part	8:	List the Totals of Each Part of this Form				
55.	Part 1	: Total real estate, line 2				\$112,500.00
56.	Part 2	: Total vehicles, line 5		\$26,477.00		
57.	Part 3	: Total personal and household items, line 15	_	\$1,850.00		
58.	Part 4	: Total financial assets, line 36		\$2,212.10		
59.	Part 5	: Total business-related property, line 45		\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	?	\$0.00		
61.	Part 7	: Total other property not listed, line 54	+ _	\$0.00		
62.	Total	personal property. Add lines 56 through 61	_	\$30,539.10	Copy personal property to	stal \$30,539.10
63.	Total	of all property on Schedule A/B. Add line 55 + line	€ 62			\$143,039.10

Official Form 106A/B Schedule A/B: Property page 6

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		DOGGIIIC	T ddC ±0 01 01	
Fill in this infor	mation to identify your	case:		
Debtor 1	Tara Franklin			
	First Name	Middle Name	Last Name	
Debtor 2	Jason Buddy Fra	nklin		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (DF PENNSYLVANIA	
Case number _				
(if known)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.						
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)						
	■ You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)					
2.	2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
Brief description of the property and line on Schedule A/B that lists this property Schedule A/B that lists this property Specific laws the portion you own							
	Copy the value from Check only one box for each exemption.						

Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2953 Ruthwood Avenue Pittsburgh, PA 15227 Allegheny County	\$112,500.00		\$32,702.43	11 U.S.C. § 522(d)(1)
Residence: House Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2019 Jeep Cheroke 15000 miles Vehicle:	\$24,047.00	•	\$5,570.00	11 U.S.C. § 522(d)(2)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2019 Jeep Cheroke 15000 miles Vehicle:	\$24,047.00	•	\$18,477.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2011 Mitsubishi Galant 83250 miles Vehicle:	\$2,430.00	•	\$2,430.00	11 U.S.C. § 522(d)(2)
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
Household furnishings Line from Schedule A/B: 6.1	\$400.00	•	\$400.00	11 U.S.C. § 522(d)(3)
Ellic Hotti Goriodalo AVD. G.1			100% of fair market value, up to any applicable statutory limit	

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	a Franklin on Buddy Franklin			Case number (if known)	
	iption of the property and line on I/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
Electron	i cs Schedule A/B: 7.1	\$1,000.00	•	\$1,000.00	11 U.S.C. § 522(d)(3)
Line nom	Schedule Add.			100% of fair market value, up to any applicable statutory limit	
Clothes Line from	Schedule A/B: 11.1	\$250.00		\$250.00	11 U.S.C. § 522(d)(3)
				100% of fair market value, up to any applicable statutory limit	
Jewelry Line from	Schedule A/B: 12.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(4)
				100% of fair market value, up to any applicable statutory limit	
Cash Line from	Schedule A/B: 16.1	\$1.00		\$1.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	g Account: PNC Bank Schedule A/B: 17.1	\$45.00		\$45.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	g Account: PNC Bank Schedule A/B: 17.2	\$30.00		\$30.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
_	Account: PNC Bank Schedule A/B: 17.3	\$900.00		\$900.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
• •	etirement: Wells Fargo Schedule A/B: 21.1	\$1,236.10		\$1,236.10	11 U.S.C. § 522(d)(12)
				100% of fair market value, up to any applicable statutory limit	
(Subject to	laiming a homestead exemption adjustment on 4/01/22 and every			led on or after the date of adjustme	nt.)
■ No □ Yes.	Did you acquire the property cove	red by the exemption wi	ithin 1	,215 days before you filed this case	?
	No			, - :, : : : : : ; : : : : : : : : : : : : :	
	Yes				

	U-20900-CIVI	Document Page 1	8 of 57		c Main
Fill in this informat	tion to identify you	ur case:			
Debtor 1	Tara Franklin			_	
	First Name	Middle Name Last Name			
	Jason Buddy F First Name	ranklin Middle Name Last Name		-	
(Spouse if, filing)	riisi Name	Mildale Name Last Name			
United States Bankr	ruptcy Court for the	: WESTERN DISTRICT OF PENNSYLVANIA	4	-	
Case number					
(if known)				☐ Check	if this is an
				amend	ded filing
~					
Official Form	<u>106D</u>				
Schedule D	: Creditors	Who Have Claims Secure	d by Propert	V	12/15
	accurate as massible	If the married manufactor filling together, both are	avelle reeneneible for e		tion If more once
		If two married people are filing together, both are e out, number the entries, and attach it to this form.			
. Do any creditors ha	ve claims secured b	y your property?			
□ No. Check th	is box and submit t	this form to the court with your other schedules.	You have nothing else	to report on this form.	
Yes Fill in al	l of the information	helow	•		
		bolow.			
	Secured Claims		. Column A	Column B	Column C
		more than one secured claim, list the creditor separate s a particular claim, list the other creditors in Part 2. As		Value of collateral	Unsecured
		ical order according to the creditor's name.	Do not deduct the	that supports this	portion
2.1 Wells Fargo		Describe the property that secures the claim:	value of collateral. \$79,797.57	claim \$112,500.00	If any \$0.00
Creditor's Name		2953 Ruthwood Avenue Pittsburgh,			Ψ0.00
		PA 15227 Allegheny County			
		Residence: House			
PO Box 770	53	As of the date you file, the claim is: Check all that			
Minneapolis	s, MN 55480	apply. Contingent			
<u> </u>	ty, State & Zip Code	☐ Unliquidated			
rtambon, Guroot, Gu	y, otato a z.p ocac	☐ Disputed			
Who owes the debt?	? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or se	ecured		
Debtor 2 only		car loan)	courcu		
■ Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the o	,	☐ Judgment lien from a lawsuit			
Check if this claim		Other (including a right to offset)			
Date debt was incurre	ed 08/1/2019	Last 4 digits of account number 1277			
	-	Column A on this page. Write that number here:	\$79,79	3 7.57	
If this is the last page	ge of your form, add	the dollar value totals from all pages.	¢70.70)7 F7	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$79,797.57

Write that number here:

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				Document	Page 1	9 of 57		
Fill in t	his informa	ation to identify your						
Debtor	1	Tara Franklin						
		First Name	Middle Na	ame	Last Name			
Debtor	2	Jason Buddy Frai	nklin					
(Spouse if	, filing)	First Name	Middle Na	ame	Last Name			
United S	States Bank	kruptcy Court for the:	WESTERN	DISTRICT OF P	ENNSYLVANIA	1		
Case nu	umber			=			_	01 1 1 11 11
(if known)								Check if this is an amended filing
								amended ming
Officia	al Form	106E/F						
Sche	dule E/	F: Creditors W	ho Have	Unsecure	d Claims			12/15
any exec Schedule Schedule left. Attac	utory contra e G: Executo e D: Creditor ch the Contii d case numb	ects or unexpired leases ory Contracts and Unexp s Who Have Claims Seco nuation Page to this pag oer (if known).	that could resu ired Leases (Of ured by Properi e. If you have n	lt in a claim. Also ficial Form 106G). sy. If more space i o information to r	list executory of the	contracts on Schedule A/E any creditors with partial the Part you need, fill it o	3: Property (Off ly secured clain ut, number the	laims. List the other party to icial Form 106A/B) and on ns that are listed in entries in the boxes on the lditional pages, write your
Part 1:	List All	of Your PRIORITY Un	secured Clair	ns				
	•	s have priority unsecure	d claims agains	st you?				
	No. Go to Par	t 2.						
	es.							
Part 2:	List All	of Your NONPRIORIT	V Uncocured	Claims				
_	-	s have nonpriority unsec	_	•				
ЦΝ	No. You have	nothing to report in this pa	art. Submit this f	orm to the court wi	th your other sche	edules.		
■ Y	es.							
unse	ecured claim, one creditor	list the creditor separately	for each claim.	For each claim list	ed, identify what t	holds each claim. If a cre ype of claim it is. Do not list three nonpriority unsecure	t claims already	included in Part 1. If more
								Total claim
4.1	Citibank			Last 4 digits of a	ccount number	2185		\$24,424.00
		Creditor's Name		_				· ,
		covery/Centralized		When was the de	bt incurred?	Opened 03/08 Las 10/19/19	st Active	
	Bankrupt Po Box 7			which was the de	bt incurred?	10/13/13		_
_	St Louis,	MO 63179						
		eet City State Zip Code		As of the date yo	u file, the claim	s: Check all that apply		
	_	ed the debt? Check one.		_				
	Debtor 1	•		Contingent				
		ebtor 2 only Unliquidated						
	Debtor 1	and Debtor 2 only		Disputed				
		one of the debtors and and		Type of NONPRIC	JKITY unsecure	d claim:		
		this claim is for a comm	nunity	☐ Student loans				
	debt Is the claim	subject to offset?	☐ Obligations arising out of a separation agreement or divorce that y report as priority claims					ot
	■ No	-				g plans, and other similar o	ebts	
	☐ Yes			Other. Specify	•			
				Outloit Opeolly				

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	1 Tara Franklin 2 Jason Buddy Franklin		Case number (if known)	
4.2	Citibank	Last 4 digits of account number	8071	\$7,939.00
	Nonpriority Creditor's Name Attn: Recovery/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim in	Opened 10/13 Last Active 10/19/19	V 1,000.00
	Who incurred the debt? Check one.	As of the date you me, the dam'r	3. Oncok all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Credit Collections USA, LLC Nonpriority Creditor's Name	Last 4 digits of account number	8101	\$332.00
	Attn: Bankruptcy 16 Distributor Drive Ste 1	When was the debt incurred?	Opened 12/18	
	Morgantown, WV 26501 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only			
	Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	☐ Yes	■ Other. Specify Orthopaedi	Attorney South Hills c	
4.4	First Mark Services Nonpriority Creditor's Name	Last 4 digits of account number	6917	\$7,038.00
	First Mark Services Po Box 82522 Lincoln, NE 68501	When was the debt incurred?	Opened 04/16 Last Active 10/20/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No	·	y pians, and other similar debts	
	Yes	Other. Specify Unsecured		

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Debto	or 2 Jason Buddy Franklin		Case number (if known)				
4.5	Kohls/Capital One	Last 4 digits of account number	4394	\$332.00			
	Nonpriority Creditor's Name Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201	When was the debt incurred?	Opened 05/10 Last Active 9/07/19				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Charge Acc	count				
4.6	PNC Bank	Last 4 digits of account number	8143	\$14,835.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 94982: Mailstop	When was the debt incurred?	Opened 08/16 Last Active 10/10/19				
	Br-Yb58-01-5 Cleveland, OH 44101						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim					
	Debtor 1 only	Пол					
	_						
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:				
	At least one of the debtors and another	Student loans	- Odini.				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Credit Card					
4.7	PNC Bank	Last 4 digits of account number	2079	\$8,742.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 94982: Mailstop Br-Yb58-01-5	When was the debt incurred?	Opened 09/19 Last Active 10/27/19	V 0,1-1-10			
	Cleveland, OH 44101 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	• • • • • • • • • • • • • • • • • • • •				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes ☐ Other. Specify Credit Card						

Debtor 1 Tara Franklin

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	Tara Franklin 2 Jason Buddy Franklin		Case number (if known)						
4.8	Synchrony Bank/Care Credit	Last 4 digits of account number	1263	\$903.00					
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	Opened 07/15 Last Active 10/06/19						
	Who incurred the debt? Check one.	,	er errock an alax appry						
	■ Debtor 1 only □ Contingent								
	☐ Debtor 2 only ☐ Unliquidated								
	Debtor 1 and Debtor 2 only	Disputed							
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:						
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sena	ration agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims	nation agreement of arveree that you did not						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
	☐ Yes	Other. Specify Charge Acc	count						
	Transworld Sys Inc/51 Nonpriority Creditor's Name	Last 4 digits of account number	8502	\$185.00					
	Attn: Bankruptcy Po Box 15618	When was the debt incurred?	Opened 11/18						
	Wilmington, DE 15618 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply						
	Who incurred the debt? Check one.	As of the date you me, the claim	э. Опеск ан шасарру						
	■ Debtor 1 only □ Contingent								
	☐ Debtor 2 only ☐ Unliquidated								
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:								
	Check if this claim is for a community								
	debt Is the claim subject to offset?	— Obligations ansing out of a separation agreement of divorce that you did not							
	■ No	Debts to pension or profit-sharing							
	☐ Yes	■ Other. Specify Care Pa	Attorney Medexpress Urgent						
· 1	Wells Fargo Bank NA	Last 4 digits of account number	9049	\$3,152.00					
	Nonpriority Creditor's Name Attn: Bankruptcy 1 Home Campus Mac X2303-01a	When was the debt incurred?	Opened 03/15 Last Active 10/06/19						
	Des Moines, IA 50328 Number Street City State Zip Code	As of the date you file, the claim	is. Chack all that apply						
	Who incurred the debt? Check one.	As of the date you me, the dam	S. Oncok all that apply						
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:						
	☐ Check if this claim is for a community debt	Student loans	water area mant or division that the second						
	ls the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing							
	Yes	Other. Specify Credit Card	<u> </u>						

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1	Tara Franklin	o	
Debtor 2	Jason Buddy Franklin	Case number (if known)	

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					_
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	· —	
		here.		\$	67,882.00
	6i.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	67.000.00
	OJ.	Total Notiphority. Add lines of unough of.	oj.	Ψ	67,882.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Tara Franklin			
	First Name	Middle Name	Last Name	
Debtor 2	Jason Buddy Fra	nklin		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA	
Case number (if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Us Bank	Acct# 3732057622
Attn Cbdh	Opened 08/18
Oshkosh, WI 54903	Lease of 2019 Jeep Cherokee

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		Documer	nt Page 25 c	of 57	
Fill in this i	information to identify your	case:			
Debtor 1	Tara Franklin				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Jason Buddy Frai		Last Name		
Spouse II, IIIIII	g) Filst Name	Middle Name			
Jnited State	es Bankruptcy Court for the:	WESTERN DISTRICT OF	PENNSYLVANIA		
Case numb	er				- 0
(if known)					Check if this is an amended filing
					amended hing
Official	Form 106H				
Sched	ule H: Your Code	ebtors			12/15
our name a	and case number (if known). ou have any codebtors? (If)	Answer every question.	•	o this page. On the top of any as a codebtor.	Additional Fages, write
■ Na					
■ No □ Yes					
□ res					
	in the last 8 years, have you a, California, Idaho, Louisiana,			y? (Community property states ington, and Wisconsin.)	and territories include
■ No. (Go to line 3.				
☐ Yes.	Did your spouse, former spou	se, or legal equivalent live	with you at the time?		
in line 2 Form 1	2 again as a codebtor only if	that person is a guaranto	or or cosigner. Make	if your spouse is filing with y sure you have listed the credi 16G). Use Schedule D, Schedu	tor on Schedule D (Official
_	Column 1: Your codebtor ame, Number, Street, City, State and ZII	² Code		Column 2: The creditor to Check all schedules that a	whom you owe the debt pply:
3.1				☐ Schedule D, line	
	lame			☐ Schedule E/F, line	
				☐ Schedule G, line	
N	lumber Street			_	
	City	State	ZIP Code		
				Польти в г	
3.2	lame			Schedule D, line	
				☐ Schedule E/F, line ☐ Schedule G. line	
	lumber Street				
IN	iumboi Sileet				

State

City

ZIP Code

Fill in this information	to identify your case:	
Debtor 1	Tara Franklin	
Debtor 2 (Spouse, if filing)	Jason Buddy Franklin	
United States Bankrup	otcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA	
Case number(If known)		Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Form		13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	Describe Employment				
1.	Fill in your employment information.		Debto	r 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Empleyment status	■ Em	ployed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not	employed	☐ Not employed
	employers.	Occupation	Store Manager		Asset Protection Specialist
	Include part-time, seasonal, or self-employed work.	Employer's name	GameStop		Home Depot
	Occupation may include student or homemaker, if it applies.	Employer's address		Vestport Parkway evine, TX 76051	2455 Paces Ferry Rd Atlanta, GA 30339
		How long employed there?		2 Years, 0 Months	1 Years, 6 Months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 3,751.67 \$ 2,823.43

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106l Schedule I: Your Income page 1

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Debt Debt		Tara Franklin Jason Buddy Franklin	-	Case	number (<i>if known</i>)			
				For	Debtor 1		ebtor 2 or iling spouse	
	Cop	by line 4 here	4.	\$	3,751.67	\$	2,823.43	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	718.77	\$	430.37	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	131.43	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	288.08	\$	257.83	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	_ 5h.⊣	+ \$_	0.00	+ \$	0.00	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,138.28	\$	688.20	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,613.39	\$	2,135.23	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$_	0.00	ς— \$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		Ψ	0.00	Ψ	0.00	
		settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$_	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	_ 8h.+	- \$_	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,613.39 + \$_	2,13	35.23 = \$ 4,7	48.62
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not a cify:	depen	,	•	•	hedule J. 11. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The respect that amount on the Summary of Schedules and Statistical Summary of Certain lies			,		12. \$ 4,7	48.62
13.	Do :	you expect an increase or decrease within the year after you file this form' No.	?				Combined monthly inc	ome

Yes. Explain: Home Depot Change: Maternity leave - First child due May 2020 - wife's pay cut in half.

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:			l		
Deb		Tara Franklir				Ch	eck if this is:	
Deb	101 1	Tara Franklii	1				An amended filir	ng
	tor 2	Jason Buddy	y Frankliı	า				nowing postpetition chapter
(Spo	ouse, if filing)						13 expenses as	of the following date:
Unit	ed States Bankr	ruptcy Court for the	WESTE	RN DISTRICT OF PENNS	SYLVANIA		MM / DD / YYYY	(
1	e number nown)							
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your l	Expen	ses				12/1
Be info	as complete a ormation. If m nber (if know	and accurate as ore space is ne n). Answer ever	possible. eded, atta y question	If two married people ar ch another sheet to this				
Pari	t 1: Descr Is this a joir	ibe Your House	hold					
	□ No. Go to							
	Yes. Doe	s Debtor 2 live i	in a separa	ate household?				
	■ N		st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of De	btor 2.	
2.	Do vou have	e dependents?	■ No					
	Do not list Debtor 2.	-	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						□ Yes □ No
								Pes
								□ No
							_	□ Yes □ No
								□ Yes
3.	expenses of	penses include f people other t d your depende	han _	No Yes				
Par	t 2: Estim	ate Your Ongoi	na Monthi	v Expenses				
Est	imate your ex	penses as of yo	our bankrı	uptcy filing date unless y	ou are using this followed are using the solution of the solut	orm as a s J, check	supplement in a C the box at the top	Chapter 13 case to report of the form and fill in the
the		h assistance and		government assistance i luded it on <i>Schedule I:</i>)			Your e	xpenses
(,						
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgage	e 4.	\$	797.95
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
	4b. Prope	rty, homeowner's				4b.	·	0.00
				pkeep expenses		4c.	·	0.00
5.		owner's associat nortgage payme		dominium dues o ur residence, such as ho	me equity loans	4d. 5.	·	0.00 0.00

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Debtor 1 Tara Franklin Debtor 2 Jason Buddy Franklin		Case num	ber (if known)	
6. Utilities:				
6a. Electricity, heat, natural gas		6a.	\$	350.00
6b. Water, sewer, garbage collection		6b.	\$	150.00
6c. Telephone, cell phone, Internet, s	atellite, and cable services	6c.	\$	445.65
6d. Other. Specify:		6d.	\$	0.00
Food and housekeeping supplies			\$	450.00
Childcare and children's education co	osts	8.	\$	0.00
Clothing, laundry, and dry cleaning				60.00
Personal care products and services		10.	·	100.00
Medical and dental expenses		11.	*	200.00
Transportation. Include gas, maintenar	nce, bus or train fare		<u> </u>	200.00
Do not include car payments.	ice, bus of train face.	12.	\$	400.00
Entertainment, clubs, recreation, new	spapers, magazines, and books	13.	\$	0.00
Charitable contributions and religious		14.	·	0.00
Insurance.			*	0.00
Do not include insurance deducted from	your pay or included in lines 4 or 20.			
15a. Life insurance	,	15a.	\$	0.00
15b. Health insurance		15b.	·	0.00
15c. Vehicle insurance		15c.	·	127.60
15d. Other insurance. Specify:		15d.	·	0.00
Taxes. Do not include taxes deducted fr	rom your pay or included in lines 4 or 20	130.	Ψ	0.00
Specify: Installment or lease payments:	om your pay or included in lines 4 or 20.	16.	\$	0.00
17a. Car payments for Vehicle 1		17a.	\$	323.00
17b. Car payments for Vehicle 2		17a. 17b.	·	0.00
. ,			·	
17c. Other Specify:		17c.		0.00
17d. Other. Specify:	and any and that	17d.	Φ	0.00
	nce, and support that you did not report as hedule I, Your Income (Official Form 106I).	18.	\$	0.00
Other payments you make to support			\$	0.00
Specify:	•	19.	· -	3.00
	uded in lines 4 or 5 of this form or on Sche		our Income.	
20a. Mortgages on other property		20a.		0.00
20b. Real estate taxes		20b.	·	0.00
20c. Property, homeowner's, or renter's	s insurance	20c.	·	0.00
20d. Maintenance, repair, and upkeep		20d.	·	0.00
20e. Homeowner's association or cond		20d. 20e.	·	0.00
	ommun duos		·	
Other: Specify: Vet		21.	· ·	60.00
Terminix			+\$	50.00
Amazon			+\$	14.00
Dollar Shave Club			+\$	10.00
Calculate your monthly expenses			Φ.	0.500.00
22a. Add lines 4 through 21.	D. I. O. W		\$	3,538.20
22b. Copy line 22 (monthly expenses for	r Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line 22a and 22b. The result is	s your monthly expenses.		\$	3,538.20
Calculate your monthly net income.				
23a. Copy line 12 (your combined mon	• /	23a.	·	4,748.62
23b. Copy your monthly expenses from	n line 22c above.	23b.	-\$	3,538.20
23c. Subtract your monthly expenses f The result is your <i>monthly net inco</i>		23c.	\$	1,210.42
 Do you expect an increase or decrease For example, do you expect to finish paying for modification to the terms of your mortgage? No. 	se in your expenses within the year after yo or your car loan within the year or do you expect your	u file this mortgage	s form? payment to increa	se or decrease because of a

Explain here: First child due May 2020. Will increase expenses with new baby in home. Yes.

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Fill in this	information to identify your	case.		
		ouse.		
Debtor 1	Tara Franklin First Name	Middle Name	Last Name	
Debtor 2	Jason Buddy Fra			
(Spouse if, filin		Middle Name	Last Name	
United Stat	tes Bankruptcy Court for the:	WESTERN DISTRICT C	OF PENNSYLVANIA	
Case numb	per			
(if known)				☐ Check if this is an
				amended filing
Official I	Form 100Dee			
	Form 106Dec		D.14. J. O.1.	1.1
Decia	ration About a	in Individual	Debtor's Sche	dules 12/15
f two marri	ied people are filing togethe	r, both are equally respor	nsible for supplying correct in	iformation.
ou must fi	ile this form whenever you fi	le bankruptcy schedules	or amended schedules. Maki	ing a false statement, concealing property, or
			ruptcy case can result in fine	es up to \$250,000, or imprisonment for up to 20
ears, or bo	oth. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.		
	_			
	Sign Below			
Did yo	ou pay or agree to pay some	one who is NOT an attor	ney to help you fill out bankru	uptcy forms?
■ N	No			
пγ	Yes. Name of person			Attach Bankruptcy Petition Preparer's Notice,
ш.				Declaration, and Signature (Official Form 119)
Under	nonalty of poriury I doclaro	that I have road the sum	mary and schedules filed with	a this declaration and
	ney are true and correct.	that I have read the Sum	mary and schedules med with	i tilis deciaration and
	•			
	/ Tara Franklin		X /s/ Jason Buddy	
	ara Franklin		Jason Buddy Fr	
SIÇ	gnature of Debtor 1		Signature of Debto	η Z
Da	ate March 13, 2020		Date March 13	i, 2020

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Fill	in this inform	nation to identify your	case:			
	otor 1	Tara Franklin				
		First Name	Middle Name	Last Name		
Deb	otor 2	Jason Buddy Fra	anklin			
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	nkruptcy Court for the:	WESTERN DISTRICT O	F PENNSYLVANIA		
	se number				_	heck if this is an mended filing
Sta	s complete a	of Financial A	ble. If two married people		equally responsible for supp	
		ore space is needed, ı). Answer every ques		this form. On the top of an	y additional pages, write you	r name and case
Par	t 1: Give D	etails About Your Ma	rital Status and Where You	u Lived Before		
1.	What is your	current marital statu	s?			
	■ Married□ Not mar	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you li	ved in the last 3 years. Do n	ot include where you live nov	ı.	
	Debtor 1 Pr	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there
3. state					ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	edule H: Your Codebtors (C	official Form 106H).		
Par	t 2 Evnlai	n the Sources of You	Income			
ı aı	LXPIAII	Title Cources of Tour	moone			
4.	Fill in the tota	I amount of income you	received from all jobs and	ng a business during this y all businesses, including part ve together, list it only once u		idar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

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Debtor 1 Tara Franklin

Debtor 2 Jason Buddy Franklin				Case number (if known)				
				Dahtar 4		Dahtar 0		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last caler anuary 1 to	ndar year: December 3	1, 2019)	■ Wages, commissions, bonuses, tips	\$37,698.48	■ Wages, combonuses, tips	ımissions,	\$30,050.91
				☐ Operating a business		☐ Operating a	business	
		dar year befo December 3		■ Wages, commissions, bonuses, tips	\$66,423.00	☐ Wages, combonuses, tips	ımissions,	\$0.00
				☐ Operating a business		☐ Operating a	business	
	List each	•	e gross inco	ee and you have income that your from each source separated. Debtor 1		,		
				Sources of income	Gross income from	Sources of inc		Gross income
				Describe below.	each source (before deductions and exclusions)	Describe below		(before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pay	ments You	Made Before You Filed for	Bankruptcy			
i .	Are eithe	Neither Del	otor 1 nor D	's debts primarily consume bebtor 2 has primarily consu personal, family, or househol	ımer debts. Consumer debt	s are defined in 11	U.S.C. § 101(8) as "incurred by an
		□ No. □ Yes	Go to line 7 List below 6	each creditor to whom you pai	d a total of \$6,825* or more i	in one or more pay	ments and the	
			not include	editor. Do not include paymer payments to an attorney for the ton 4/01/22 and every 3 years	his bankruptcy case.			d allmony. Also, do
	■ Yes.			r both have primarily consure you filed for bankruptcy, di		ll of \$600 or more?	>	
		□ No.	Go to line 7					
			include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.				
	Creditor	's Name and	Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this pa	yment for
	Wells F PO Box Minnea		5480		\$2,362.65	\$79,797.57	■ Mortgage □ Car □ Credit Ca □ Loan Rep □ Suppliers □ Other	ard payment

Del	otor 2 Jason Buddy Franklin		Cas	e number (if known)		
	Creditaria Nama and Address	Dates of normant	Total amount	A manuat wan	Was this pay	mant far
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
	US Bank PO Box 2188		\$969.00	\$3,876.00	☐ Mortgage ■ Car	
	Oshkosh, WI 54903				☐ Credit Car	·d
					Loan Rep	
					☐ Suppliers	•
					Other	01 10110010
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partner or more of their voting	erships of which yo g securities; and a	u are a general ny managing ag	partner; corporation ent, including one fo
	No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
8.	Within 1 year before you filed for bankrupto insider?	cy, did you make any pay	ments or transfer a	ny property on a	ccount of a de	bt that benefited an
	Include payments on debts guaranteed or cosi	igned by an insider.				
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for t	his payment
			paid	still owe	Include credit	or's name
Pai	t 4: Identify Legal Actions, Repossession	s. and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.					
	No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	shed, attached	seized, or levied?
	No. Go to line 11.					
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	d			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment became No		luding a bank or fir	nancial institution	ı, set off any aı	mounts from your
	Yes. Fill in the details.			_		
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at		erty in the possessi	ion of an assigne	e for the benef	it of creditors, a
	■ No					
	☐ Yes					

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	otor 2	Jason Buddy Franklin		Case number	(if known)	
Par	t 5:	List Certain Gifts and Contributions	s			
				, did you give any gifts with a total value of more t	han \$600 ner nerson	?
0.	_	No	аргоу,	, and you give any gine with a total value of more t	nan 4000 per person	•
		Yes. Fill in the details for each gift.				
		s with a total value of more than \$60 person	0	Describe the gifts	Dates you gave the gifts	Value
	Perse Addr	on to Whom You Gave the Gift and ress:				
4.	_	n 2 years before you filed for bankru No	uptcy,	did you give any gifts or contributions with a tota	l value of more than	\$600 to any charity?
		Yes. Fill in the details for each gift or co	ontribu	ution.		
	more Char	s or contributions to charities that to e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value
Dar		List Certain Losses	,			
5.		n 1 year before you filed for bankru mbling?	ptcy o	or since you filed for bankruptcy, did you lose any	thing because of the	t, fire, other disaster
	_					
	_	No				
	_	Yes. Fill in the details.			5.	
		cribe the property you lost and the loss occurred		ribe any insurance coverage for the loss	Date of your loss	Value of property lost
				de the amount that insurance has paid. List pending ance claims on line 33 of <i>Schedule A/B: Property.</i>		
Par	t 7:	List Certain Payments or Transfers	2			
		-				
6.	consu	ulted about seeking bankruptcy or p	prepar	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services required		rty to anyone you
		No				
	■ Y	Yes. Fill in the details.				
	Pers	on Who Was Paid		Description and value of any property	Date payment	Amount of
	Addr	ress il or website address		transferred	or transfer was made	payment
		on Who Made the Payment, if Not Y	ou′		maue	
	Cala	aiaro Valencik		\$335.00 Filing fee	2/23/2020	\$2,335.00
		Penn Avenue		\$66.00 Credit report		
		Floor, Suite 501 sburgh, PA 15222		\$1,934.00 Legal fees		
7.	promi		ditors	did you or anyone else acting on your behalf pay or to make payments to your creditors? sted on line 16.	or transfer any prope	rty to anyone who
		No				
	_ '	Yes. Fill in the details.				
		on Who Was Paid		Description and value of any property	Date payment	Amount of
	Addr	ress		transferred	or transfer was	payment
					made	

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Debtor 1 Tara Franklin

Debtor 2 Jason Buddy Franklin

Case number (if known)

 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your p include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. 						
	Person Who Received Transfer Address	Description and v property transferr		paym	ribe any property or ents received or debts n exchange	Date transfer was made
	Person's relationship to you					
19.		ears before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device? (These are often called asset-protection devices.)				
	Name of trust	Description and v	alue of the prop	perty trans	sferred	Date Transfer was
						made
Par	rt 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit	Boxes, and Sto	orage Unit	ts	
20	Within 1 year before you filed for bankruptcy, w	vere any financial ac	counts or instri	ıments he	eld in your name, or for yo	ur benefit, closed
_0.	sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associat	ther financial accour	nts; certificates	of deposi		, ,
	■ No	,				
	Yes. Fill in the details.					
		est 4 digits of ecount number	· · · · · · · · · · · · · · · · · · ·		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	cash, or other valuables?	r before you filed for	bankruptcy, ar	y safe de	posit box or other deposit	ory for securities,
	Yes. Fill in the details.	Who also had see	4- 40	Dagarika	the contents	De ven etill
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?
22.	Have you stored property in a storage unit or p	lace other than your	home within 1	year befo	re you filed for bankruptcy	/?
	No					
	Yes. Fill in the details.	Who also has ar h	and announce	Docariba	the contents	Do you still
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had account to it? Address (Number, Street, Cit State and ZIP Code)			Describe	the contents	Do you still have it?
Par	rt 9: Identify Property You Hold or Control for	Someone Else				
23.			ıde any propert	y you bor	rowed from, are storing fo	or, or hold in trust
	■ No					
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S			the property	Value
_		Code)				
Par	rt 10: Give Details About Environmental Inform	ation				
For	the purpose of Part 10, the following definitions	apply:				
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Tara Franklin

Debtor 2 Jason Buddy Franklin

Case number (if known)

	regul	ations controlling the cleanup of these	e substances, wastes, or material.						
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								
Rep	ort all	notices, releases, and proceedings th	at you know about, regardless of when	they occurred.					
24.	l. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	_	No Yes. Fill in the details.							
		e of site 'ess (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have	you notified any governmental unit of	any release of hazardous material?						
		No Yes. Fill in the details.							
		e of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
		No Yes. Fill in the details.							
	_		Court or agoney	Nature of the case	Status of the				
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	case				
Pa	rt 11:	Give Details About Your Business or	Connections to Any Business						
27.	Withi	n 4 years before you filed for bankrup	tcy, did you own a business or have an	y of the following connections to an	y business?				
	[☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	[☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	ı	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	No. None of the above applies. Go to Part 12.								
	Yes. Check all that apply above and fill in the details below for each business.								
		ness Name	Describe the nature of the business	Employer Identification number					
	(Numb	'ess per, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security numb kkeeper Dates business existed					
28.		n 2 years before you filed for bankrup utions, creditors, or other parties.	tcy, did you give a financial statement t		ude all financial				
		No							
		es. Fill in the details below.							
	Nam Addı (Numb		Date Issued						

Part 12: Sign Below

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Debtor 2 Jason	Buddy Franklin		Case number (if known)
with a bankruptcy of			c, concealing property, or obtaining money or property by fraud in connection prisonment for up to 20 years, or both.
/s/ Tara Franklin		/s/ Jas	son Buddy Franklin
Tara Franklin		Jasor	n Buddy Franklin
Signature of Debto	or 1	Signat	ture of Debtor 2
Date March 13,	2020	Date	March 13, 2020
Did you attach addi	itional pages to Your Statem	ent of Financial A	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you pay or agre	ee to pay someone who is no	ot an attorney to I	help you fill out bankruptcy forms?
■ No			
☐ Yes. Name of Per	rson Attach the Bankr	uptcy Petition Prep	parer's Notice, Declaration, and Signature (Official Form 119).

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Ellis distributor				
	mation to identify your	case:		
Debtor 1	Tara Franklin First Name	Middle Name	Last Name	
Debtor 2	Jason Buddy Fra	anklin		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTR	RICT OF PENNSYLVANIA	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
Stateme	nt of Intentic	n for Indiv	iduals Filing Under Chaر	oter 7 12/15
	ividual filing under cha	•	I out this form if:	
_	e claims secured by yo sed personal property		ot avaired	
You must file thi	is form with the court v	within 30 days after	you file your bankruptcy petition or by the date	
whiche	,	he court extends the	e time for cause. You must also send copies t	o the creditors and lessors you list
	eople are filling togethened that the form.	r in a joint case, bo	th are equally responsible for supplying corre	et information. Both debtors must
Be as complete:	and accurate as possi	ble. If more space is	s needed, attach a separate sheet to this form.	On the top of any additional pages.
	our name and case nu		,	on me top or any additional pages,
Part 1: List Yo	our Creditors Who Hav	ve Secured Claims		
1. For any credit	ore that you listed in F	Part 1 of Schodula D	: Creditors Who Have Claims Secured by Prop	porty (Official Form 106D) fill in the
information be	elow.			· ·
Identify the cr	editor and the property	that is collateral	What do you intend to do with the property secures a debt?	that Did you claim the property as exempt on Schedule C?
				ac oxempt on concause of
Creditor's V	Volle Fargo			□No
name:	Vells Fargo		☐ Surrender the property.☐ Retain the property and redeem it.	□ NO
			☐ Retain the property and enter into a	Yes
property	2953 Ruthwood A Pittsburgh, PA 15		Reaffirmation Agreement.	
securing debt:	County		Retain the property and [explain]:	
or consist and a	Residence: House	•	Debtor will keep making payments	
Part 2: List Y	our Unexpired Person	al Property Leases		
For any unexpire	ed personal property le	ease that you listed	in Schedule G: Executory Contracts and Unexpired leases are leases that are still in effect	
			the trustee does not assume it. 11 U.S.C. § 365	
Describe your I	inexpired personal pro	norty leases		Will the lease be assumed?
Describe your c	mexpired personal pre	perty leases		Will the lease be assumed:
Lessor's name:	acad			□ No
Description of lea Property:	aseu			☐ Yes
				00
Lessor's name:	hase			□ No
Description of lea Property:	aseu			☐ Yes
•				55

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2	Tara Franklin Jason Buddy Franklin	Case number (if known)
	·	
Lessor's na		□ No
Description Property:	of leased	☐ Yes
Lessor's na		□ No
Description Property:	of leased	☐ Yes
Lessor's na		□ No
Description Property:	of leased	☐ Yes
Lessor's na		□ No
Description Property:	of leased	☐ Yes
Lessor's na		□ No
Property:	i oi leaseu	☐ Yes
Part 3:	Sign Below	
	alty of perjury, I declare that I have indicated at is subject to an unexpired lease.	my intention about any property of my estate that secures a debt and any personal
X /s/ Ta	ara Franklin	X /s/ Jason Buddy Franklin
	Franklin ture of Debtor 1	Jason Buddy Franklin Signature of Debtor 2
Date	March 13, 2020	Date March 13, 2020

Fill in this inf	formation to identify your case:					irected	in this form and	in Form
Debtor 1	Tara Franklin			2A-1Sı	lbb:			
Debtor 2 (Spouse, if filing	Jason Buddy Franklin			□ 1. T	here is no pres	umptio	n of abuse	
United State	es Bankruptcy Court for the: Western District of	Pennsylvania		á		nade ur	mine if a presun nder <i>Chapter 7 I</i> arm 122A-2)	
Case number	er				`		not apply now be	and of
(ii kilowii)							e but it could ap	
				☐ Ch	eck if this is a	n ame	nded filing	
Official	Form 122A - 1							
Chapte	er 7 Statement of Your Cur	rent Moi	nthly Inc	om	е			12/19
ettach a separcase number qualifying mill Part 1: 1. What is Not	te and accurate as possible. If two married people a rate sheet to this form. Include the line number to will known). If you believe that you are exempted froi itary service, complete and file Statement of Exempted Calculate Your Current Monthly Income s your marital and filing status? Check one or married. Fill out Column A, lines 2-11.	hich the addition a presumption tion from Presum ly. It both Columns	al information a of abuse becau inption of Abuse	applies se you <i>Under</i>	On the top of aid on the top of aid on the top of the t	ny addit narily c	tional pages, writ onsumer debts o	e your name and r because of
☐ Mar	ried and your spouse is NOT filing with you.	You and your s	spouse are:					
	iving in the same household and are not lega	Ily separated.	Fill out both Co	lumns	A and B, lines 2	2-11.		
ŗ	iving separately or are legally separated. Fill of penalty of perjury that you and your spouse are low iving apart for reasons that do not include evadir	egally separated	d under nonbar	kruptc	y law that applie	es or th		
101(10A). I the 6 mont	average monthly income that you received from all For example, if you are filing on September 15, the 6-m hs, add the income for all 6 months and divide the total wn the same rental property, put the income from that p	onth period would by 6. Fill in the re	be March 1 thro sult. Do not inclu	ugh Aug de any i	just 31. If the amo	ount of y ore than	our monthly incom once. For examp	ne varied during le, if both
·				Colur		Debt	mn B or 2 or filing spouse	
	ross wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$	3,751.67	\$	2,823.43	
Column	ny and maintenance payments. Do not include n B is filled in.		•	\$	0.00	\$	0.00	
of you from ar and roo	ounts from any source which are regularly pa or your dependents, including child support. In unmarried partner, members of your household ommates. Include regular contributions from a sp . Do not include payments you listed on line 3.	Include regular , your depende	contributions nts, parents,	\$	0.00	\$	0.00	
5. Net inc	come from operating a business, profession,							
			otor 1					
	receipts (before all deductions)	\$ 0.00						
	ry and necessary operating expenses	-\$ 0.00	Commission	Φ.	0.00	Φ.	0.00	
	onthly income from a business, profession, or far	n \$	Copy here ->	Φ	0.00	\$	0.00	
6. Net inc	come from rental and other real property	Dah	tor 1					
_		\$ 0.00	otor 1					
	receipts (before all deductions)	·						
	ry and necessary operating expenses		Cany have	¢.	0.00	¢	0.00	
Net mo	onthly income from rental or other real property	\$ 0.00	Copy here ->	Φ	0.00	\$	0.00	

Official Form 122A-1

0.00

7. Interest, dividends, and royalties

0.00

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Sach Solution. Then add the total for Solution 7.16 the total for Solution 2.	
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. \$ 0.00	
the Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00 Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. \$ 0.00 \$ 0.00 \$ 0.00 Total amounts from separate pages, if any. + \$ 0.00 \$ 0.00 1. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	
Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 0. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. \$\text{0.00}\$\$ \$0.00 \$\$\$ \$0.00 \$\$\$ \$0.00 \$\$\$\$ \$0.00 \$\$\$\$ \$0.00 \$\$\$\$\$\$\$\$	
benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Again the service of the uniformed services. If no the service of the uniformed services of the uniformed services. If no the service of the uniformed services of the uniformed services. If no the service of the uniformed services of the uniformed services. If no the service of the uniformed services of the uniformed services. If no the service of the uniformed services of the uniformed services of the uniformed services. If no the service of the uniformed services of the uniformed	
benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 1. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 1. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 1. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 1. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 1. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	
\$ 0.00 \$ 0.00 Total amounts from separate pages, if any. + \$ 0.00 \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. \$ 3,751.67 + \$ 2,823.43 = \$ Total current monthly income.	
Total amounts from separate pages, if any. + \$ 0.00 \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	
11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. \$ 3,751.67 + \$ 2,823.43 \$ Total current monthly income.	
each column. Then add the total for Column A to the total for Column B. \$\\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
	6,575.10 current monthly
12. Calculate your current monthly income for the year. Follow these steps:	
12a. Copy your total current monthly income from line 11 Copy line 11 here=> \$	6,575.10
Multiply by 12 (the number of months in a year)	
12b. The result is your annual income for this part of the form	78,901.20
13. Calculate the median family income that applies to you. Follow these steps:	-
Fill in the state in which you live.	
Fill in the number of people in your household.	
Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.	66,338.00
14. How do the lines compare?	
14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, <i>There is no presumption of abuse</i> . Go to Part 3. Do NOT fill out or file Official Form 122A-2.	
Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by Form 122</i> Go to Part 3 and fill out Form 122A–2.	?2A-2.
art 3: Sign Below	
By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and co	orrect
χ /s/ Tara Franklin χ /s/ Jason Buddy Franklin	
Tara FranklinJason Buddy FranklinSignature of Debtor 1Signature of Debtor 2	

Tara Franklin

Debtor 1

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Debtor 1 Debtor 2	Tara Franklin Jason Buddy Franklin	_	Case number (if known)	
Da	March 13, 2020 MM / DD / YYYY	Date	March 13, 2020 MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2.			
	If you checked line 14b, fill out Form 122A-2 and file it with this for	orm.		

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Fill in this	information to identify your case:	Check the appropriate box as directed in lines 40 or 42:
Debtor 1	Tara Franklin	According to the calculations required by this
Debtor 2	Jason Buddy Franklin	Statement:
(Spouse, if	filing)	■ 1. There is no presumption of abuse.
United Stat	tes Bankruptcy Court for the: Western District of Pennsylvania	
Case numb	per	☐ 2. There is a presumption of abuse.
(ii iuiowii)		☐ Check if this is an amended filing
Official	Form 122A - 2	ű
Chapte	er 7 Means Test Calculation	04/1
To fill out t	his form, you will need your completed copy of Chapter 7 Statem	ent of Your Current Monthly Income (Official Form 122A-1)
Part 1:	pages, write your name and case number (if known). Determine Your Adjusted Income	
1. Сору	your total current monthly income. Copy line 11 f	from Official Form 122A-1 here=> \$ 6,575.10
2. Did yo	ou fill out Column B in Part 1 of Form 122A-1?	
□ No	Fill in \$0 for the total on line 3.	
	s. Is your spouse Filing with you?	
	No. Go to line 3.	
•	Yes. Fill in \$0 for the total on line 3.	
	st your current monthly income by subtracting any part of your spehold expenses of you or your dependents. Follow these steps:	pouse's income not used to pay for the
	e 11, Column B of Form 122A–1, was any amount of the income you rises of you or your dependents?	reported for your spouse NOT regularly used for the household
■ No	o. Fill in 0 for the total on line 3.	
☐ Ye	s. Fill in the information below:	
	State each purpose for which the income was used	Fill in the amount you
	For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	are subtracting from your spouse's income
		\$
		\$
		\$
	Total.	\$0.00_

Official Form 122A-2

0.00

6,575.10

Adjust your current monthly income. Subtract line 3 from line 1.

Copy total here=>... - \$ ___

\$

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Debtor 1	Tara Franklin		
	Jason Buddy Franklin	Case number (if known)	

Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 1,288.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person \$ ______**55.00**
- 7b. Number of people who are under 65 X 2
- 7c. Subtotal. Multiply line 7a by line 7b. \$ 110.00 Copy here=> \$ 110.00

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person \$ 114.00
- 7e. Number of people who are 65 or older X ______0
- 7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> +\$ 0.00

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Tara Franklin Debtor 1 Debtor 2

Jason Buddy Franklin Case number (if known)

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

					•						
		n information from t tcy purposes into tv	he IRS, the U.S. Trustee Pr	ogram	has divided	I the IRS L	ocal Stand	ard for ho	ousing for		
_		•	surance and operating export	enses							
To a	answ	er the questions in	lines 8-9, use the U.S. Trus	tee Pro	gram chart						
			ng the link specified in the sole at the bankruptcy clerk's o		instructions	for this forn	n.				
8.		-	nsurance and operating ex	-	•				. Ф		595.00
9.	Hou	sing and utilities - N	Nortgage or rent expenses	:							
	9a.		f people you entered in line 5 y for mortgage or rent expen					\$	1,016.00		
	9b.	Total average month	nly payment for all mortgages	s and ot	her debts se	ecured by yo	our home.				
			al average monthly payment, each secured creditor in the n divide by 60.								
		Name of the creditor	r		Average m	onthly					
		Wells Fargo			\$	797.95					
										Repeat this	
			Total average monthly paym	ent	\$	797.95	Copy here=>	-\$	797.95	amount on line 33a.	
	9c.	Net mortgage or ren	t expense.								
			al average monthly payment, this amount is less than \$0, 6				\$	218	.05 Copy here=>	\$	218.05
10.			6. Trustee Program's division of your monthly expenses,					g is incor	rect and	\$	0.00
	Ex	plain why:									
11.	Loc	al transportation ex	penses: Check the number	of vehicl	les for which	n you claim	an ownersh	ip or oper	ating expense		
	□ o	. Go to line 14.									
	□ 1	. Go to line 12.									
	2	or more. Go to line 1	2.								
12.			nse: Using the IRS Local State to the Operating Costs that ap							\$	474.00

Official Form 122A-2

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ebtor 1 ebtor 2		Franklin n Buddy Franklin			Case	e number (<i>if k</i>	nown)		
13.	You may		pense: Using the IRS Local if you do not make any loan						
Vel	nicle 1	Describe Vehicle 1:	2019 Jeep Cheroke 150	000 miles Vehicle	e:				
13a.	Ownersh	ip or leasing costs using	g IRS Local Standard			\$	0.00		
13b.	·	monthly payment for all clude costs for leased v	debts secured by Vehicle 1 vehicles.						
	are contr		y payment here and on line cured creditor in the 60 mon						
	Nan	ne of each creditor for	Vehicle 1	Average monthly payment	y				
	-NC	DNE-		\$					
		Total A	verage Monthly Payment	\$	^^	opy ere => -\$		Repeat this amount on line 33b.	
		cle 1 ownership or lease line 13b from line 13a.	e expense if this amount is less than \$0 2011 Mitsubishi Galant		hicle:	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
13d.	Ownersh	ip or leasing costs using	g IRS Local Standard			\$	0.00		
13e.	Average leased ve		debts secured by Vehicle 2	. Do not include cos	ts for				
	Nan	ne of each creditor for	Vehicle 2	Average monthly payment	y				
	-NC	NE-		\$					
		Total A	verage Monthly Payment	\$0.		opy ere -\$	0.0	Repeat this amount on line 33c.	
13f.	Net Vehic	cle 2 ownership or leas	e expense					Copy net	
		•	f this amount is less than \$0	, enter \$0		\$	0.00	Vehicle 2 expense here => \$	0.00
14.			: If you claimed 0 vehicles ir ce regardless of whether you			l Standard	s, fill in the	Public \$	0.00
15.	also dedu	uct a public transportati	on expense: If you claimed on expense, you may fill in v al Standard for <i>Public Tran</i> s	hat you believe is t					0.00

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Debtor 1 Debtor 2 Jason Buddy Franklin Case number (if known)

Oth	er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	s for	
16.	Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sales, or use taxes.	\$	1,867.91
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	262.86
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or		
	for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for any elementary or secondary school education.	\$	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.		
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$	90.00
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.		
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$_	0.00
24.	Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.	\$	4,905.82

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Debtor 1 Debtor 2 Jason Buddy Franklin Case number (if known)

Add	itional	Expense Deductions These are additional of	deduction	ns allowed by the	e Means Test.		
		Note: Do not include a	any expe	ense allowances	listed in lines 6-24.		
25.	Health insurar your de	r					
	Health	insurance	\$	833.99			
	Disabil	ity insurance	\$	0.00			
	Health	savings account	+ \$	0.00			
	Total		\$	833.99	Copy total here=>	\$	833.99
	Do you	actually spend this total amount?					
		• •					
		No. How much do you actually spend? Yes	\$				
26		res nued contributions to the care of household c		mambars Tho	actual monthly expenses that you will		
20.	continu	ue to pay for the reasonable and necessary care ousehold or member of your immediate family when e contributions to an account of a qualified ABLE	and sup no is una	port of an elderly able to pay for su	y, chronically ill, or disabled member of uch expenses. These expenses may	\$	0.00
27.	7. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.						
	By law, the court must keep the nature of these expenses confidential.						
28.	 Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8. 						
		pelieve that you have home energy costs that are fill in the excess amount of home energy costs.	e more th	nan the home er	nergy costs included in expenses on line		
		ust give your case trustee documentation of you it claimed is reasonable and necessary.	r actual e	expenses, and y	ou must show that the additional	\$	0.00
29.	\$170.8	tion expenses for dependent children who ar 3* per child) that you pay for your dependent chi elementary or secondary school.					
		ust give your case trustee documentation of you d is reasonable and necessary and not already a					
	* Subje	ect to adjustment on 4/01/22, and every 3 years a	after that	for cases begui	n on or after the date of adjustment.	\$	0.00
30.	higher	onal food and clothing expense. The monthly than the combined food and clothing allowances % of the food and clothing allowances in the IRS	in the If	RS National Star			
		l a chart showing the maximum additional allowa tions for this form. This chart may also be availal					
	You mi	ust show that the additional amount claimed is re	easonabl	le and necessary	у.	\$	0.00
31.		nuing charitable contributions. The amount that nents to a religious or charitable organization. 26			ntribute in the form of cash or financial	+\$	0.00
32.		Il of the additional expense deductions. les 25 through 31.				\$	833.99

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Debtor 1	Tara Franklin		
	Jason Buddy Franklin	Case number (if known)	

Dedu	ctions for Debt Payment						
	33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.						
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.						
	Mortgages on your home:					verage monthly ayment	
33a.	Copy line 9b here				:> \$	797.95	
	Loans on your first two vehicles:						
33b.	Copy line 13b here			=	:> \$	0.00	
33c.					:> \$	0.00	
33d.	List other secured debts:						
Name	of each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes of insurance?			
				□ No			
-	-NONE-			☐ Yes	\$		
				□ No			
				☐ Yes	\$		
-				_			
				□ No			
-				□ Yes	+\$		
					Сору		
33e.	Total average monthly payment. Add l	nes 33a through 33d	\$	797.95	total here=>	\$ 797.95	
		secured by your primary residence, a vehice upport or the support of your dependents?	ele,				
	No. Go to line 35.						
		at pay to a creditor, in addition to the payments assion of your property (called the <i>cure amount</i>) information below.					
Name	e of the creditor	Identify property that secures the debt		Total cure amount		Monthly cure amount	
-NO	NE-		\$	÷	-60 = \$		
					7		
		Tota	al \$	0.00	Copy total here=>	\$0.00	
	o you owe any priority claims such a e past due as of the filing date of yo	s a priority tax, child support, or alimony - t ur bankruptcy case? 11 U.S.C. § 507.	hat				
	No. Go to line 36.						
	I Yes. Fill in the total amount of all of ongoing priority claims, such a	these priority claims. Do not include current or a those you listed in line 19.					
	Total amount of all past-due p	riority claims	\$	0.00	÷ 60 =	\$	

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ebtor 1 ebtor 2		Franklin n Buddy Franklin		Case	e numb	er (<i>if known</i>)		
Fo	r more	eligible to file a case under Chapter 13? 11 U.S.C. § a information, go online using the link for Bankruptcy Bases for this form. Bankruptcy Basics may also be available	ics specified			e.			
	No.	Go to line 37.							
	Yes.	Fill in the following information.							
		Projected monthly plan payment if you were filing under	r Chapter 13	;	\$				
		Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for di and North Carolina) or by the Executive Office for Unite (for all other districts).	stricts in Ala	stees	×				
		To find a list of district multipliers that includes your distribute link specified in the separate instructions for this for be available at the bankruptcy clerk's office.					c	opy total	
		Average monthly administrative expense if you were fil	ing under Ch	apter 13	\$_			ere=> \$	
		of the deductions for debt payment. s 33e through 36.						\$_	797.95
Total [Deduc	tions from Income							
38. Ad	ld all o	f the allowed deductions.							
		e 24, All of the expenses allowed under IRS e allowances	\$	4,905.82	_				
С	opy lin	e 32, All of the additional expense deductions	\$	833.99					
С	opy lin	e 37, All of the deductions for debt payment	+\$	797.95	- 				
		Total deductions	\$	6,537.76	_ C	opy total	here	=> \$ _	6,537.76
art 3:	Det	ermine Whether There is a Presumption of Abuse							
39. Ca	lculate	e monthly disposable income for 60 months							
39	9a. Co	py line 4, adjusted current monthly income	\$	6,575.10	_				
39	9b. Co	py line 38, Total deductions	-\$	6,537.76	_				
39		nthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$	37.34		opy ere=>\$		37.34	<u> </u>
F	or the i	next 60 months (5 years)					x 60		
39	9d. To	tal. Multiply line 39c by 60	39d.	\$	2,2	40.40	Copy here=>	\$	2,240.40
40. Fi r	nd out	whether there is a presumption of abuse. Check the	box that app	lies:			_		
	The li	ine 39d is less than \$8,175*. On the top of page 1 of th	is form, chec	k box 1, <i>The</i>	ere is	no presu	mption of	abuse. Go t	to Part 5.
		ine 39d is more than \$13,650*. On the top of page 1 of if you claim special circumstances. Go to Part 5.	this form, ch	eck box 2, 7	here	is a pres	umption c	of abuse. Yo	u may fill out
	The li	ine 39d is at least \$8,175*, but not more than \$13,650)*. Go to line	41.					
		to adjustment on 4/01/22, and every 3 years after that for			ne dat	e of adio	istment		

Tara Franklin

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enough to pay sumption of abuse. ere is a at 5. ent monthly income for which there is a
Copy here=> \$enough to pay sumption of abuse. ere is a rt 5.
Copy here=> \$enough to pay sumption of abuse. ere is a rt 5.
enough to pay sumption of abuse. ere is a rt 5.
enough to pay sumption of abuse. ere is a rt 5.
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ent monthly income for which there is i
ent monthly income for which there is a
and monthly moonle for which there is t
and a Product Conserve
come adjustment for each
in a constant and a
income adjustments al expenses or income
nthly expense djustment
ajustinent
any attachments is true and correct.
nklin
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rd

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 20-20966-CMB Doc 1 Filed 03/13/20 Entered 03/13/20 11:47:27 Desc Main Document Page 56 of 57

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

In	Tara Franklin re Jason Buddy Franklin		Case No.		
		Debtor(s)	Chapter	7	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorn	ey for the above nam	ed debtor(s) and that	and on to
	compensation paid to me within one year before the filin be rendered on behalf of the debtor(s) in contemplation of				ed or to
	For legal services, I have agreed to accept	\$66.00 Credit report	\$	1,934.00	
	Prior to the filing of this statement I have received	\$66.00 Credit report	\$	1,934.00	
	Balance Due		\$	0.00	
2.	\$335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are mem	pers and associates of my	law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				irm. A
5.	In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspect	s of the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credito d. [Other provisions as needed] All work billed hourly 	ement of affairs and plan which	may be required;		cy;
7.	By agreement with the debtor(s), the above-disclosed fee All work billed hourly	does not include the following	g service:		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the debto	r(s) in
	March 13, 2020	/s/ David Z. Valen	cik		
	Date	David Z. Valencik Signature of Attorne Calaiaro Valencik 938 Penn Avenue Suite 501 Pittsburgh, PA 15	y c s, 5th Fl.		
		412-232-0930 Fa Name of law firm			
		rume oj tuvi jitili			

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United States Bankruptcy Court Western District of Pennsylvania

	Tara Franklin			
In re	Jason Buddy Franklin		Case No.	
		Debtor(s)	Chapter	7
The abo		TICATION OF CREDITOR t the attached list of creditors is true and c		of their knowledge.
Date:	March 13, 2020	/s/ Tara Franklin Tara Franklin Signature of Debtor		
Date:	March 13, 2020	/s/ Jason Buddy Franklin		
		Jason Buddy Franklin		

Signature of Debtor